

GAO Highlights

Highlights of [GAO-23-106829](#), a testimony before the Subcommittee on Health, Committee on Energy and Commerce, House of Representatives

Why GAO Did This Study

HHS is responsible for leading and coordinating all matters related to federal public health and medical preparedness for, and response to, emergencies.

For over a decade, GAO has identified deficiencies at HHS that have hindered the nation's response to the COVID-19 pandemic and to a variety of past emergencies, including other infectious diseases. This includes the H1N1 influenza pandemic, Zika, and Ebola—and extreme weather events, such as hurricanes. This statement summarizes key findings from GAO's [January 2022](#) addition of HHS's leadership and coordination of public health emergencies to its High-Risk List and related [2023 High-Risk report](#).

What GAO Recommends

Through GAO's body of work in this area, GAO has made 155 recommendations to HHS to improve its leadership and coordination of public health emergency preparedness and response efforts. As of April 2023, 91 of these recommendations remain unimplemented.

View [GAO-23-106829](#). For more information, contact Mary Denigan-Macauley at (202) 512-7114 or deniganmacauley@gao.gov.

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PUBLIC HEALTH PREPAREDNESS

Critical Need to Address Deficiencies in HHS's Leadership and Coordination of Emergencies

What GAO Found

GAO has found persistent deficiencies in the Department of Health and Human Services' (HHS) ability to lead and coordinate the nation's preparedness for, and response to, public health emergencies. Specifically, HHS has consistently fallen short in five areas of an effective national response (see figure).

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|  | Establish clear roles and responsibilities for the wide range of key federal, state, local, tribal, territorial, and nongovernmental partners. |
|  | Collect and analyze complete and consistent data to inform decision-making—including any midcourse changes necessary—as well as future preparedness. |
|  | Provide clear, consistent communication to key partners and the public. |
|  | Establish transparency and accountability to help ensure program integrity and build public trust. |
|  | Understand key partners' capabilities and limitations. |

Source: GAO analysis (data); GAO (icons). | GAO-23-106829

For example, GAO found that HHS has not

- developed clear roles and responsibilities, including exercising them;
- developed an interoperable network of systems for near real-time public health situational awareness, as required in statute since 2006;
- provided clear, consistent communication about disease outbreaks, including information about COVID-19 testing;
- been transparent when disseminating information during an emergency, such as the scientific reasoning for changes to the COVID-19 testing guidelines; and
- undertaken key workforce planning to meet its emergency planning and response mission and goals.

Sustained leadership and attention from the executive branch and Congress in this area is needed to ensure the systemic issues GAO has identified are sustainably addressed so that the U.S. is adequately prepared for future emergencies. A whole-of-nation multidisciplinary approach to preparedness and response is essential. HHS partnership and engagement with nonfederal entities, including state, local, tribal, and territorial governments, and the private sector are key elements of this approach. GAO will continue to monitor HHS's efforts in this area.